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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							A	Application or Docket Number 10/583,033			ing Date 15/2006	☐ To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY				HER THAN	
FOR			NUMBER FILED		.ED	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1 16(a), (b), or (c))			N/A			N/A	ı	N/A			N/A		
SEARCH FEE (37 CFR 1 16(k), (i), or (m))			N/A			N/A	1	N/A			N/A		
EXAMINATION FEE (37 CFR 1,16(o), (p), or (q))			N/A			N/A		N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		us 20 = *		1	x \$ =		OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =		nus 3 = *		1	x \$ = 1		1	X 8 =		
☐APPLICATION SIZE FEE (37 CFR 1.16(s)) If the specifical sheets of paper is \$250 (\$125 additional 50 s					tion and drawings exceed 100 or, the application size fee due for small entity) for each theets or fraction thereof. See a)(1)(G) and 37 CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							ı						
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		ı	TOTAL		
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)								SMAL	L ENTITY	OR		ER THAN ALL ENTITY	
AMENDMENT	02/23/2011	CLAIMS REMAININ AFTER AMENDM			HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	* 18		Minus	20	-		X \$ =		OR	X \$ =		
	Independent (37 CFR 1.16(h))	· 3		Minus	3	-		X \$ =		OR	X S =		
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))						П			OR			
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
L		(Column	_		(Column 2		_						
ENT		CLAIM REMAINI AFTER AMENDM	ING R		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,15())			Minus		-		× s =		OR	x s =		
ENDM	Independent (37 CFR 1 16(h))			Minus	***	=	l	X \$ =		OR	X \$ =		
Ų.	Application Size Fee (37 CFR 1.16(s))						l			ı			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))						ı			OR			
										OR	TOTAL ADD'L FEE		
** If	*If the ordry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" N THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" N THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1. The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1. This collection of Indemation is required by 37 GFR 11.6. In information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to												

in a conscience of information is required by a CVEH. 1.16. The first fi